

The Biology of the Autistic Syndromes, 3rd Edition.

Christopher Gillberg and Mary Coleman. Cambridge University Press, NY. 2000. 330 pp. \$95.00 USA

The Biology of the Autistic Syndromes is a timely book, in that the numbers of autistic children appear to be on the rise. It seems likely that many more pediatricians and child psychiatrists will need to develop an understanding of the diagnostic features and known organic associations of these disorders as the need for diagnostic and treatment services increases. Parents of autistic children are often well educated, and generally well informed through parents' and advocacy groups. As a result of this, they expect a higher level of expertise from the specialists with whom they consult.

Although the subject of the autistic syndromes is approached predominantly from a biological standpoint, the book's coverage encompasses far more than one would assume from the title, ranging from diagnostic approaches, through epidemiology and cognitive profiles, to a description of the clinical course in both children and adults. It provides an up to date and thorough review of the current state of understanding of autism and related disorders. From a Canadian point of view, one would have hoped for a more detailed discussion of the work of Peter Szatmari, which is so relevant both clinically and in our understanding of the cognitive development of children and adults with these disorders. However, many other ways of conceptualizing autism are reviewed, and the result is several informative and thought provoking introductory chapters describing the diagnostic and developmental issues. Indeed, the majority of the information required to answer the questions of parents, and our own intellectual curiosity, is well covered.

As would be expected from the title, the organic aspects of autism are thoroughly described, from biological and genetic, to disease related etiologies. Autistic disorders are considered to be a common end point of many neurological processes. The discussion of 'double syndromes' (dual/multiple diagnosis that includes autism

as one of the diagnoses) is interesting in that it sheds some light on the neurological disturbances that can lead to autistic symptoms and thus suggests many potential areas for future research. Other chapters list the current findings in genetics, endocrinology, etc. Unfortunately, no clear pattern seems to arise from the current body of knowledge, but several topics for further investigation become apparent and each chapter has an extensive list of references to guide further reading.

A suggested list of biological investigations is provided, a useful starting point for those attempting to devise their own list of relevant and cost effective tests during the process of establishing services for this group of children. Unfortunately the usefulness of this list is limited by the lack of discussion as to the clinical relevance and treatment implications of the various tests. As autistic children are not likely to be as cooperative as one would hope, and may be traumatized in the process of providing blood or even a 24 hour urine sample, this analysis would have been useful. As a profession, we also have to face the realities of a medical system that is severely underfunded and in which we have to be more aware of cost benefit ratios than was, perhaps, the case in the past. A brief discussion of these factors would have been useful.

The Biology of the Autistic Syndromes should be available in all medical libraries, and any individuals involved in research into the causes of autism or development of clinical services will find it a useful reference that will enable them to be aware of the findings outside their own body of knowledge. No doubt many parents will also turn to it in their attempts to explain the challenges that their children face and in their desperation to find some relief for one of the most challenging and heartbreaking disabilities.

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Treating Abused Adolescents.

Eliana Gil. The Guilford Press, NY. 1996. 228 pp. Paperback. \$40.00. USA

This is one of a several books that Dr Gil has written or co-authored on abuse issues.

Treating Abused Adolescents consists of 7 chapters and an after word. The overview (Chapter 1) reminds the reader about the developmental tasks of the adolescent period, the types of abuse that youth may suffer, and the range of responses to that abuse the clinician may see. Chapter 2 provides an in-depth review of the normal developmental tasks of adolescences and how abuse may interfere with attainment of these tasks. Chapter 3 reviews the differences between working with the youth who are currently being abused or was abused in the recent past and the youth who have a long history of cumulative abuse. Chapter 4 gives a concise and practical framework to the assessment process and the formulation of treatment goals. Chapter 5 provides practical suggestions for carrying out the treatment goals: acknowledging the abuse, addressing the impact of the abuse and creating a way for the individual either to limit the impact of the abuse in current life or to move beyond the abuse. Chapter 6 provides general principles for working with adolescents who have been abused. This chapter should have been much earlier in the book, as the principles need to guide the assessment and setting of treatment goals as well as the process of treatment. Chapter 7 reviews the need to provide treatment through a variety of modalities (individual, group, and family). While this information could have been included in Chapter 5, processing the trauma, it is important to have it highlighted in a separate chapter. Each of these modalities, when used at the right moment, provides specific and powerful benefit to the overall treatment plan. Providing the same information in another modality may not have the same impact. Some of this information is repeat-

ed in other parts of the book to highlight a specific situation. The Afterword reminds us that every therapist will have both successes and failures when working with adolescents who have been abused and both outcomes should be reviewed as part of ongoing learning.

Dr Gil writes in a clear and concise manner that engages the reader. She provides useful clinical examples and, at times, provides the transcribed dialogue of an actual treatment session demonstrating how she worked with the individual. Repeatedly, she reminds us that working with people who have been abused is complex, challenging and, ultimately, rewarding. Acts of abuse may have vastly different effects on different individuals. The need for flexibility is highlighted by the observations that techniques that are very effective with one person may be ineffective or even contraindicated in another. The need to address and treat co-morbid conditions, such as depression, could have more emphasis. Dr Gil gives reminders that the therapist must always be aware of transference and countertransference issues and manage them directly.

Mandatory reporting of abuse is superficially addressed by providing the definitions of abuse from the US Department of Health and Human Services. Every therapist who works with youth must be fully conversant with the specific requirements for reporting abuse in the jurisdiction in which they work. More could have been said directly about the issues that arise when mandatory abuse reporting occurs during the course of treatment.

This book is very useful both for the therapist beginning work with people who have been abused, and for the experienced therapist as a reminder of the significant and important issues for treatment.

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